

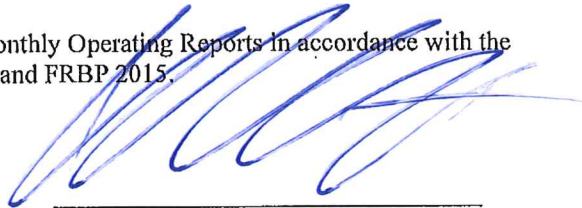
UNITED STATES BANKRUPTCY COURT
Northern DISTRICT OF Georgia
Atlanta DIVISION

IN RE:	}	CASE NUMBER
	}	18-67291
<u>Southeastern Hospitality LLC</u>	}	
	}	JUDGE
	}	
DEBTOR.	}	CHAPTER 11

DEBTOR'S STANDARD MONTHLY OPERATING REPORT (BUSINESS)

FOR THE PERIOD
FROM 05/01/2019 TO 05/31/2019

Comes now the above-named debtor and files its Monthly Operating Reports in accordance with the Guidelines established by the United States Trustee and FRBP 2015.



Attorney for Debtor's Signature

Debtor's Address
and Phone Number:

24 Leslie St NE

Atlanta, GA 30307

(404) 695-0398

Attorney's Address
and Phone Number:

Century Plaza I

2987 Clairmont Rd.

Suite 175

Atlanta, GA 30329

Note: The original Monthly Operating Report is to be filed with the court and a copy simultaneously provided to the United States Trustee Office. Monthly Operating Reports must be filed by the 20th day of the following month.

For assistance in preparing the Monthly Operating Report, refer to the following resources on the United States Trustee Program Website, http://www.usdoj.gov/ust/r21/reg_info.htm

- 1) Instructions for Preparations of Debtor's Chapter 11 Monthly Operating Report
- 2) Initial Filing Requirements
- 3) Frequently Asked Questions (FAQs) <http://www.usdoj.gov/ust/>

SCHEDULE OF RECEIPTS AND DISBURSEMENTS
FOR THE PERIOD BEGINNING 5/1/19 **AND ENDING** 05/31/19

Name of Debtor: Southeastern Hospitality LLC
 Date of Petition: 10/12/2018

Case Number 18-67291

	<u>CURRENT MONTH</u>	<u>CUMULATIVE PETITION TO DATE</u>
1. FUNDS AT BEGINNING OF PERIOD	6,489.09 (a)	20,762.00 (b)
2. RECEIPTS:		
A. Cash Sales	254,306.86	2,601,503.18
Minus: Cash Refunds	(-)	-10,788.63
Net Cash Sales	254,306.86	2,590,714.55
B. Accounts Receivable		
C. Other Receipts (See MOR-3)		
(If you receive rental income, you must attach a rent roll.)	254,306.86	2,590,714.55
3. TOTAL RECEIPTS (Lines 2A+2B+2C)	254,306.86	2,590,714.55
4. TOTAL FUNDS AVAILABLE FOR OPERATIONS (Line 1 + Line 3)	260,795.95	2,611,479.55
5. DISBURSEMENTS		
A. Advertising		
B. Bank Charges		
C. Contract Labor		
D. Fixed Asset Payments (not incl. in "N")		
E. Insurance		
F. Inventory Payments (See Attach. 2)		
G. Leases		
H. Manufacturing Supplies		
I. Office Supplies		
J. Payroll - Net (See Attachment 4B)		
K. Professional Fees (Accounting & Legal)		
L. Rent		
M. Repairs & Maintenance		
N. Secured Creditor Payments (See Attach. 2)		
O. Taxes Paid - Payroll (See Attachment 4C)		
P. Taxes Paid - Sales & Use (See Attachment 4C)		
Q. Taxes Paid - Other (See Attachment 4C)		
R. Telephone		
S. Travel & Entertainment		
Y. U.S. Trustee Quarterly Fees		
U. Utilities		
V. Vehicle Expenses		
W. Other Operating Expenses (See MOR-3)		
6. TOTAL DISBURSEMENTS (Sum of 5A thru W)		
7. ENDING BALANCE (Line 4 Minus Line 6)	(c)	(c)

I declare under penalty of perjury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and belief.

This ____ day of _____, 20__.

(Signature)

- (a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.
- (b) This figure will not change from month to month. It is always the amount of funds on hand as of the date of the petition.
- (c) These two amounts will always be the same if form is completed correctly.

MOR-2

TO BE AMENDED

MONTHLY SCHEDULE OF RECEIPTS AND DISBURSEMENTS (cont'd)

Detail of Other Receipts and Other Disbursements

OTHER RECEIPTS:

Describe Each Item of Other Receipt and List Amount of Receipt. Write totals on Page MOR-2, Line 2C.

<u>Description</u>	<u>Current Month</u>	<u>Cumulative Petition to Date</u>
TOTAL OTHER RECEIPTS		

"Other Receipts" includes Loans from Insiders and other sources (i.e. Officer/Owner, related parties directors, related corporations, etc.). Please describe below:

<u>Loan Amount</u>	<u>Source of Funds</u>	<u>Purpose</u>	<u>Repayment Schedule</u>

OTHER DISBURSEMENTS:

Describe Each Item of Other Disbursement and List Amount of Disbursement. Write totals on Page MOR-2, Line 5W.

<u>Description</u>	<u>Current Month</u>	<u>Cumulative Petition to Date</u>
TOTAL OTHER DISBURSEMENTS		

NOTE: Attach a current Balance Sheet and Income (Profit & Loss) Statement.

ATTACHMENT 1

MONTHLY ACCOUNTS RECEIVABLE RECONCILIATION AND AGING

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291

Reporting Period beginning 05/01/2019 Period ending 05/31/2019

ACCOUNTS RECEIVABLE AT PETITION DATE: _____

ACCOUNTS RECEIVABLE RECONCILIATION

(Include all accounts receivable, pre-petition and post-petition, including charge card sales which have not been received):

Beginning of Month Balance	\$ _____ (a)
PLUS: Current Month New Billings	
MINUS: Collection During the Month	\$ _____ (b)
PLUS/MINUS: Adjustments or Writeoffs	\$ _____ *
End of Month Balance	\$ _____ (c)

*For any adjustments or Write-offs provide explanation and supporting documentation, if applicable:

POST PETITION ACCOUNTS RECEIVABLE AGING

(Show the total for each aging category for all accounts receivable)

0-30 Days	31-60 Days	61-90 Days	Over 90Days	Total
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____ (c)

For any receivables in the "Over 90 Days" category, please provide the following:

<u>Customer</u>	<u>Receivable Date</u>	<u>Status</u> (Collection efforts taken, estimate of collectibility, write-off, disputed account, etc.)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.

(b) This must equal the number reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 2B).

(c) These two amounts must equal.

ATTACHMENT 2
MONTHLY ACCOUNTS PAYABLE AND SECURED PAYMENTS REPORT

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291

Reporting Period beginning 05/01/2019 Period ending 05/31/2019

In the space below list all invoices or bills incurred and not paid since the filing of the petition. Do not include amounts owed prior to filing the petition. In the alternative, a computer generated list of payables may be attached provided all information requested below is included.

POST-PETITION ACCOUNTS PAYABLE

[illegible]

☐ Check here if pre-petition debts have been paid. Attach an explanation and copies of supporting documentation.

ACCOUNTS PAYABLE RECONCILIATION (Post Petition Unsecured Debt Only)

Opening Balance	\$ _____	(a)
PLUS: New Indebtedness Incurred This Month	\$ _____	
MINUS: Amount Paid on Post Petition, Accounts Payable This Month	\$ _____	
PLUS/MINUS: Adjustments	\$ _____	*
Ending Month Balance	\$ _____	(c)

*For any adjustments provide explanation and supporting documentation, if applicable.

SECURED PAYMENTS REPORT

List the status of Payments to Secured Creditors and Lessors (Post Petition Only). If you have entered into a modification agreement with a secured creditor/lessor, consult with your attorney and the United States Trustee Program prior to completing this section).

Secured Creditor/ Lessor	Date Payment Due This Month	Amount Paid This Month	Number of Post Petition Payments Delinquent	Total Amount of Post Petition Payments Delinquent
TOTAL			(d)	

(a) This number is carried forward from last month's report. For the first report only, this number will be zero.

(b, c) The total of line (b) must equal line (c).

(d) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5N).

ATTACHMENT 3
INVENTORY AND FIXED ASSETS REPORT

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291
Reporting Period beginning 05/01/2019 Period ending 05/31/2019

INVENTORY REPORT

INVENTORY BALANCE AT PETITION DATE: \$ _____
INVENTORY RECONCILIATION:
Inventory Balance at Beginning of Month \$ _____ (a)
PLUS: Inventory Purchased During Month \$ _____
MINUS: Inventory Used or Sold \$ _____
PLUS/MINUS: Adjustments or Write-downs \$ _____ *
Inventory on Hand at End of Month \$ _____

METHOD OF COSTING INVENTORY: _____

*For any adjustments or write-downs provide explanation and supporting documentation, if applicable.

INVENTORY AGING

Less than 6 months old	6 months to 2 years old	Greater than 2 years old	Considered Obsolete	Total Inventory
_____ %	_____ %	_____ %	_____ %	= _____ 100%*

* Aging Percentages must equal 100%.

☐ Check here if inventory contains perishable items.

Description of Obsolete Inventory: _____

FIXED ASSET REPORT

FIXED ASSETS FAIR MARKET VALUE AT PETITION DATE: _____ (b)
(Includes Property, Plant and Equipment)

BRIEF DESCRIPTION (First Report Only): _____

FIXED ASSETS RECONCILIATION:
Fixed Asset Book Value at Beginning of Month \$ _____ (a)(b)
MINUS: Depreciation Expense \$ _____
PLUS: New Purchases \$ _____
PLUS/MINUS: Adjustments or Write-downs \$ _____ *
Ending Monthly Balance \$ _____

*For any adjustments or write-downs, provide explanation and supporting documentation, if applicable.

BRIEF DESCRIPTION OF FIXED ASSETS PURCHASED OR DISPOSED OF DURING THE REPORTING PERIOD: _____

(a) This number is carried forward from last month's report. For the first report only, this number will be the balance as of the petition date.

(b) Fair Market Value is the amount at which fixed assets could be sold under current economic conditions.
Book Value is the cost of the fixed assets minus accumulated depreciation and other adjustments.

ATTACHMENT 4A

MONTHLY SUMMARY OF BANK ACTIVITY - OPERATING ACCOUNT

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291

Reporting Period beginning 05/01/2019 Period ending 05/31/2019

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm. If bank accounts other than the three required by the United States Trustee Program are necessary, permission must be obtained from the United States Trustee prior to opening the accounts. Additionally, use of less than the three required bank accounts must be approved by the United States Trustee.

NAME OF BANK: Private Bank of Decatur BRANCH: Decatur

ACCOUNT NAME: Southeastern Hospitality LLC ACCOUNT NUMBER: 77704

PURPOSE OF ACCOUNT: OPERATING

Ending Balance per Bank Statement	\$	1,653.80	
Plus Total Amount of Outstanding Deposits	\$		
Minus Total Amount of Outstanding Checks and other debits	\$		*
Minus Service Charges	\$		
Ending Balance per Check Register	\$	1,653.80	** (a)

*Debit cards are used by Earl Cloud, Julian Goglia, Andrew Smith, John Fogleman

**If Closing Balance is negative, provide explanation: _____

The following disbursements were paid in Cash (do not include items reported as Petty Cash on Attachment 4D: ☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TRANSFERS BETWEEN DEBTOR IN POSSESSION ACCOUNTS

"Total Amount of Outstanding Checks and other debits", listed above, includes:

\$	_____	Transferred to Payroll Account
\$	_____	Transferred to Tax Account

(a) The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

CHECK REGISTER - OPERATING ACCOUNT

PURPOSE OF ACCOUNT: OPERATING

[illegible]

ATTACHMENT 4B

MONTHLY SUMMARY OF BANK ACTIVITY - PAYROLL ACCOUNT

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291

Reporting Period beginning 05/01/2019 Period ending 05/31/2019

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity.
A standard bank reconciliation form can be found at http://www.usdoj.gov/ust/r21/reg_info.htm.

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: PAYROLL

Ending Balance per Bank Statement	\$	_____
Plus Total Amount of Outstanding Deposits	\$	_____
Minus Total Amount of Outstanding Checks and other debits	\$	_____*
Minus Service Charges	\$	_____
Ending Balance per Check Register	\$	_____**(a)

***Debit cards must not be issued on this account.**

****If Closing Balance is negative, provide explanation:** _____

The following disbursements were paid by Cash: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The following non-payroll disbursements were made from this account:

Date	Amount	Payee	Purpose	Reason for disbursement from this account
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(a) The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5B

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291

Reporting Period beginning 05/01/2019 Period ending 05/31/2019

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____

ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: PAYROLL

Account for all disbursements, including voids, lost payments, stop payment, etc. In the alternative, a computer generated check register can be attached to this report, provided all the information requested below is included.

[illegible]

ATTACHMENT 4C

MONTHLY SUMMARY OF BANK ACTIVITY - TAX ACCOUNT

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291

Reporting Period beginning 05/01/2019 Period ending 05/31/2019

Attach a copy of current month bank statement and bank reconciliation to this Summary of Bank Activity. A standard bank reconciliation form can be found on the United States Trustee website, <http://www.usdoj.gov/ust/r21/index.htm>.

NAME OF BANK: _____ BRANCH: _____

ACCOUNT NAME: _____ ACCOUNT NUMBER: _____

PURPOSE OF ACCOUNT: TAX

Ending Balance per Bank Statement	\$ _____
Plus Total Amount of Outstanding Deposits	\$ _____
Minus Total Amount of Outstanding Checks and other debits	\$ _____ *
Minus Service Charges	\$ _____
Ending Balance per Check Register	\$ _____ **(a)

***Debit cards must not be issued on this account.**

****If Closing Balance is negative, provide explanation:** _____

The following disbursements were paid by Cash: (☐ Check here if cash disbursements were authorized by United States Trustee)

Date	Amount	Payee	Purpose	Reason for Cash Disbursement
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The following non-tax disbursements were made from this account:

Date	Amount	Payee	Purpose	Reason for disbursement from this account
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(a)The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 5C

CHECK REGISTER - TAX ACCOUNT

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291
Reporting Period beginning 05/01/2019 Period ending 05/31/2019
NAME OF BANK: _____ BRANCH: _____
ACCOUNT NAME: _____ ACCOUNT # _____
PURPOSE OF ACCOUNT: TAX

Account for all disbursements, including voids, lost checks, stop payments, etc. In the alternative, a computer-generated check register can be attached to this report, provided all the information requested below is included.

<http://www.usdoj.gov/ust>.

CHECK				
<u>DATE</u>	<u>NUMBER</u>	<u>PAYEE</u>	<u>PURPOSE</u>	<u>AMOUNT</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

TOTAL _____(d)

SUMMARY OF TAXES PAID

Payroll Taxes Paid _____(a)
Sales & Use Taxes Paid _____(b)
Other Taxes Paid _____(c)
TOTAL _____(d)

- (a) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5O).
(b) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5P).
(c) This number is reported in the "Current Month" column of Schedule of Receipts and Disbursements (Page MOR-2, Line 5Q).
(d) These two lines must be equal.

ATTACHMENT 4D

INVESTMENT ACCOUNTS AND PETTY CASH REPORT

INVESTMENT ACCOUNTS

Each savings and investment account, i.e. certificates of deposits, money market accounts, stocks and bonds, etc., should be listed separately. Attach copies of account statements.

Type of Negotiable

Instrument	Face Value	Purchase Price	Date of Purchase	Current Market Value
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
TOTAL				_____ (a)

PETTY CASH REPORT

The following Petty Cash Drawers/Accounts are maintained:

Location of Box/Account	(Column 2) Maximum Amount of Cash in Drawer/Acct.	(Column 3) Amount of Petty Cash On Hand (Column 2) and At End of Month	(Column 4) Difference between (Column 2) and (Column 3)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
TOTAL		\$ _____ (b)	

For any Petty Cash Disbursements over \$100 per transaction, attach copies of receipts. If there are no receipts, provide an explanation _____

TOTAL INVESTMENT ACCOUNTS AND PETTY CASH(a + b) \$ _____ (c)

(c)The total of this line on Attachment 4A, 4B and 4C plus the total of 4D must equal the amount reported as "Ending Balance" on Schedule of Receipts and Disbursements (Page MOR-2, Line 7).

ATTACHMENT 6

MONTHLY TAX REPORT

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291

Reporting Period beginning 05/01/2019 Period ending 05/31/2019

TAXES OWED AND DUE

Report all unpaid post-petition taxes including Federal and State withholding FICA, State sales tax, property tax, unemployment tax, State workmen's compensation, etc.

Name of Taxing Authority	Date Payment Due	Description	Amount	Date Last Tax Return Filed	Tax Return Period
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
TOTAL			\$ <hr/>		

ATTACHMENT 7

SUMMARY OF OFFICER OR OWNER COMPENSATION

SUMMARY OF PERSONNEL AND INSURANCE COVERAGES

Name of Debtor: Southeastern Hospitality LLC Case Number: 18-67291
 Reporting Period beginning 05/01/2019 Period ending 05/31/2019

Report all forms of compensation received by or paid on behalf of the Officer or Owner during the month. Include car allowances, payments to retirement plans, loan repayments, payments of Officer/Owner's personal expenses, insurance premium payments, etc. Do not include reimbursement for business expenses Officer or Owner incurred and for which detailed receipts are maintained in the accounting records.

Name of Officer or Owner	Title	Payment Description	Amount Paid
Earl Cloud	Owner	Salary/insurance	
Julian Goglia	Officer	Salary/insurance	
Andrew Smith	Officer	Salary	

PERSONNEL REPORT

	Full Time	Part Time
Number of employees at beginning of period		
Number hired during the period		
Number terminated or resigned during period		
Number of employees on payroll at end of period		

CONFIRMATION OF INSURANCE

List all policies of insurance in effect, including but not limited to workers' compensation, liability, fire, theft, comprehensive, vehicle, health and life. For the first report, attach a copy of the declaration sheet for each type of insurance. For subsequent reports, attach a certificate of insurance for any policy in which a change occurs during the month (new carrier, increased policy limits, renewal, etc.).

Agent and/or Carrier	Phone Number	Policy Number	Coverage Type	Expiration Date	Date Premium Due
Aetna	1.800.872.3862	81301084	Health	12/31/2019	
The Guardian	880.541.7846	0-00536968	Dental	12/31/2019	
Employers	888.682.6671	5800	workers comp		
Central		9928327	general liability	11/7/2019	

The following lapse in insurance coverage occurred this month:

Policy Type	Date Lapsed	Date Reinstated	Reason for Lapse

☐ Check here if U. S. Trustee has been listed as Certificate Holder for all insurance policies.

ATTACHMENT 8

SIGNIFICANT DEVELOPMENTS DURING REPORTING PERIOD

Information to be provided on this page, includes, but is not limited to: (1) financial transactions that are not reported on this report, such as the sale of real estate (*attach closing statement*); (2) non-financial transactions, such as the substitution of assets or collateral; (3) modifications to loan agreements; (4) change in senior management, etc. Attach any relevant documents.

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

We anticipate filing a Plan of Reorganization and Disclosure Statement on or before _____.

Date 5/31/19 Page 1
Primary Account @XXXXXXXXXX@7704

Southeastern Hospitality LLC
24 Leslie St NE
Atlanta GA 30307

.....ACCOUNT SUMMARY.....
ACCOUNT NUMBER TYPE OF ACCOUNT CURRENT BALANCE
@XXXXXXXXXX@7704 COMMERCIAL FLAT FEE CHECKING 1,653.80 80

.....CHECKING ACCOUNT.....

ACCOUNT SUMMARY Southeastern Hospitality LLC

COMMERCIAL FLAT FEE CHECKING	Number of Enclosures	80
Account Number @XXXXXXXXXX@7704	Statement Dates	5/01/19 thru 6/02/19
Previous Balance 6,489.09	Days in the statement period	33
55 Deposits/Credits 254,306.86	Average Ledger	6,370.13
263 Checks/Debits 259,115.40	Average Collected	6,370.13
Service Charge 26.75		
Interest Paid .00		
Current Balance 1,653.80		

	Total For This Period	Total Year-to-Date
Insufficient funds item fees	\$140.00	\$280.00
Return item fees	\$35.00	\$35.00

Deposits and Additions

Date	Description	Amount
5/01	POC fund PAYCOR INC.	769.23
	CCD 69029701099482	
5/01	BTOT DEP BANKCARD 1237	5,277.21
	CCD 513331030151625	
5/02	FintechEFT National Distrib	660.94
	CCD 47-3390646	
5/02	Return Item Credit	9,193.02
5/02	BTOT DEP BANKCARD 1237	10,293.74
	CCD 513331030151625	
5/02	Reverse OD Item Charge	35.00
5/03	BTOT DEP BANKCARD 1237	6,014.06
	CCD 513331030151625	

Date 5/31/19 Page 2
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Deposits and Additions

Date	Description	Amount
5/06	BTOT DEP BANKCARD 1237	6,822.75
	CCD 513331030151625	
5/06	BTOT DEP BANKCARD 1237	10,110.11
	CCD 513331030151625	
5/06	BTOT DEP BANKCARD 1237	15,622.34
	CCD 513331030151625	
5/06	DDA/SAV DEPOSIT	1,732.20
5/07	BTOT DEP BANKCARD 1237	113.83
	CCD 513331030151625	
5/07	EDI PAYMNT UBER USA	137.16
	CCD 8P238BATB8QFCQ4	
5/07	BTOT DEP BANKCARD 1237	8,907.49
	CCD 513331030151625	
5/08	POC fund PAYCOR INC.	.55
	CCD 163965409100893	
5/08	675 Ponce POSTMATES INC.	118.41
	CCD ST-Y6D5W3I9I4N7	
5/08	BILL PMT Yiftee, Inc.	575.00
	PPD 110277704	
5/08	BTOT DEP BANKCARD 1237	6,759.76
	CCD 513331030151625	
5/09	BTOT DEP BANKCARD 1237	16.43
	CCD 513331030151625	
5/09	FintechEFT Empire Distribut	30.00
	CCD 47-3390646	
5/09	BTOT DEP BANKCARD 1237	6,140.52
	CCD 513331030151625	
5/10	BTOT DEP BANKCARD 1237	7,172.54
	CCD 513331030151625	
5/13	BTOT DEP BANKCARD 1237	21.34
	CCD 513331030151625	
5/13	BTOT DEP BANKCARD 1237	27.86
	CCD 513331030151625	
5/13	BillngCRZ2 Paycor1147	210.90
	CCD client 99852	

Date 5/31/19 Page 3
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Deposits and Additions

Date	Description	Amount
5/13	BTOT DEP BANKCARD 1237	8,612.40
	CCD 513331030151625	
5/13	BTOT DEP BANKCARD 1237	10,289.28
	CCD 513331030151625	
5/13	BTOT DEP BANKCARD 1237	22,326.07
	CCD 513331030151625	
5/14	Trsf from PHG The Pinewood	3,000.00
	Confirmation number 514190444	
5/14	EDI PAYMNT UBER USA	74.95
	CCD S783SIK45DX3OZZ	
5/14	675 Ponce POSTMATES INC.	112.33
	CCD ST-S4C8A1W6P5N4	
5/14	BTOT DEP BANKCARD 1237	17,607.11
	CCD 513331030151625	
5/15	BTOT DEP BANKCARD 1237	8,773.88
	CCD 513331030151625	
5/16	BTOT DEP BANKCARD 1237	8,381.63
	CCD 513331030151625	
5/17	BTOT DEP BANKCARD 1237	19.43
	CCD 513331030151625	
5/17	BTOT DEP BANKCARD 1237	4,225.25
	CCD 513331030151625	
5/17	return ach- stop pay	2,124.58
5/20	BTOT DEP BANKCARD 1237	1,314.55
	CCD 513331030151625	
5/20	BTOT DEP BANKCARD 1237	7,841.96
	CCD 513331030151625	
5/20	BTOT DEP BANKCARD 1237	12,760.50
	CCD 513331030151625	
5/21	BTOT DEP BANKCARD 1237	3,996.25
	CCD 513331030151625	
5/22	BTOT DEP BANKCARD 1237	6,611.61
	CCD 513331030151625	
5/23	FintechEFT National Distrib	48.62
	CCD 47-3390646	

Date 5/31/19 Page 4
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Deposits and Additions

Date	Description	Amount
5/23	BTOT DEP BANKCARD 1237	5,112.24
	CCD 513331030151625	
5/24	BTOT DEP BANKCARD 1237	5,088.84
	CCD 513331030151625	
5/28	BTOT DEP BANKCARD 1237	15.59
	CCD 513331030151625	
5/28	BTOT DEP BANKCARD 1237	2,619.40
	CCD 513331030151625	
5/28	BTOT DEP BANKCARD 1237	3,519.47
	CCD 513331030151625	
5/28	BTOT DEP BANKCARD 1237	5,055.15
	CCD 513331030151625	
5/28	BTOT DEP BANKCARD 1237	6,929.77
	CCD 513331030151625	
5/29	Trsf from PHG The Pinewood	5,000.00
	Confirmation number 529190642	
5/30	POC fund PAYCOR INC.	227.60
	CCD 65305851653983	
5/30	BTOT DEP BANKCARD 1237	1,935.83
	CCD 513331030151625	
5/30	ATM Service Charge Reversal	3.00
5/31	BTOT DEP BANKCARD 1237	3,917.18
	CCD 513331030151625	

Checks and Withdrawals

Date	Description	Amount
5/01	DBT CRD 1209 04/30/19 10312107	65.72-
	FACEBK NA3	
	1601 Willow Road	
	Menlo Park CA C#9165	
5/01	DBT CRD 0000 04/30/19 45508657	110.75-
	SQU*SQ *TH	
	195 Ottley Drive N	
	Atlanta GA C#9215	
5/01	DBT CRD 0000 04/30/19 08020514	293.62-
	ROYAL FOOD	

Date 5/31/19 Page 5
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
	3720 ZIP INDUSTRIA	
	TEL6786862234 GA C#9215	
5/01	DBT CRD 0348 04/30/19 94345528	993.17-
	UNITED ENE	
	919 S 7TH STREET S	
	8002962203 ND C#9215	
5/01	FintechEFT Savannah Distrib	79.99-
	CCD 47-3390646	
5/01	FINTECHEFT Rive Gauche Wine	150.83-
	CCD 47-3390646	
5/01	PaycorFees PAYCOR INC.	231.35-
	CCD 183889803005469	
5/01	FintechEFT Empire Distribut	562.06-
	CCD 47-3390646	
5/01	SETTLEMENT Rewards Network	636.16-
	CCD 31360-024495172	
5/01	FintechEFT National Distrib	660.94-
	CCD 47-3390646	
5/01	MAY GP INS THE GUARDIAN	805.21-
	PPD 53696800CC10000	
5/01	VENDOR PAY SYSCO ATLANTA	1,097.69-
	CCD Cust #193425	
5/01	CORP COLL INLAND FRESH SEA	1,229.75-
	CCD 40187	
5/01	Loan Pmt ACE	2,726.31-
	CCD 1630	
5/02	DBT CRD 0352 05/01/19 11929626	3.70-
	POSTMATES	
	201 3rd St Suite 20	
	8778877815 CA C#9215	
5/02	DBT CRD 2208 05/01/19 20422933	9.99-
	Spotify US	
	45 W. 18th Street	
	New York NY C#9165	
5/02	Insufficient Funds Item Fee	35.00-

Date 5/31/19 Page 6
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/02	DBT CRD 2134 05/01/19 06697037 FARMD, LLC 3423 Piedmont Rd., 17705495122 GA C#9215	25.97-
5/02	DBT CRD 0000 05/01/19 01625581 TARGET 2400 N DRUID HLS R ATLANTA GA C#9629	32.40-
5/02	DBT CRD 2134 05/01/19 06643402 FARMD, LLC 3423 Piedmont Rd., 17705495122 GA C#9215	128.00-
5/02	DBT CRD 0000 05/01/19 67822446 GOOGLE *GS 1600 Amphitheatre cc google.com CA C#9165	155.13-
5/02	DBT CRD 0000 05/01/19 08021868 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#9215	382.01-
5/02	MTOT DISC BANKCARD 8076 CCD 554402000458083	37.95-
5/02	MERCH FEE MERCHANT SERVICE CCD 8032646575	77.49-
5/02	FintechEFT Savannah Distrib CCD 47-3390646	109.63-
5/02	FINTECHEFT CHALKBOARD DISTR CCD 47-3390646	148.12-
5/02	FINTECHEFT Avant Partir CCD 47-3390646	200.64-
5/02	FINTECHEFT General Wholesal CCD 47-3390646	215.80-
5/02	FintechEFT Georgia Crown Di CCD 47-3390646	412.72-
5/02	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	877.53-

Date 5/31/19 Page 7
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/02	FINTECHEFT UNITED DISTRIBUT CCD 47-3390646	968.74-
5/02	FINTECHEFT Quality Wine & S CCD 47-3390646	1,171.08-
5/02	MTOT DISC BANKCARD 1237 CCD 513331030151625	7,524.16-
5/02	AFA AETNA AFA CCD 3955	9,193.02-
5/02	Insufficient Funds Item Fee	175.00-
5/03	DBT CRD 2131 05/02/19 14187737 POSTMATES 201 3rd St Suite 20 8778877815 CA C#9215	36.47-
5/03	DBT CRD 0000 05/01/19 01220047 MORNINGSTA 725 PARK CENTER DR ATLANTA GA C#9165	416.00-
5/03	DBT CRD 1327 05/01/19 000000001 LAZ PARKIN 675 PONCE DE LEON 4049423910 GA C#9165	450.00-
5/03	TGM Bread GENERAL MUIR CCD The Mercury	211.32-
5/03	FintechEFT National Distrib CCD 47-3390646	660.94-
5/03	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	1,934.06-
5/06	DBT CRD 1711 05/03/19 002R60B6 AMAZON.COM AMAZON.COM SEATTLE WA C#9629	24.87-
5/06	DBT CRD 0000 05/03/19 00475934 STAPLES 650 PONCE DE LEON ATLANTA GA C#9629	86.02-

Date 5/31/19 Page 8
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/06	DBT CRD 2128 05/04/19 37795880 GETBENTO.C 584 Broadway4th Fl 12127489156 NY C#9215	199.00-
5/06	DBT CRD 0000 05/03/19 08023943 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#9215	520.01-
5/06	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	66.19-
5/06	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	712.14-
5/06	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	785.39-
5/06	CORP COLL INLAND FRESH SEA CCD 40187	1,721.11-
5/06	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	2,040.79-
5/06	CHECK 60058 513 CAPITAL	300.00-
5/07	DBT CRD 0000 05/07/19 98830415 Intuit *Qu 2535 Garcia Ave 800-446-8848 CA C#9215	30.00-
5/07	DBT CRD 0000 05/06/19 00302278 PARK STREE 1000 BRICKELL AVEN MIAMI FL C#9215	376.98-
5/07	DBT CRD 0000 05/06/19 08026615 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#9215	796.04-
5/07	ACH Debit EMERALD CITY BAG CCD 5218233300	48.00-
5/07	FintechEFT Savannah Distrib CCD 47-3390646	269.28-

Date 5/31/19 Page 9
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/07	POC fund PAYCOR INC. CCD 160631702182840	2,304.31-
5/07	tax fund PAYCOR INC. CCD 145832598676410	8,118.71-
5/07	DD - Fund PAYCOR INC. CCD 144110189362486	23,200.16-
5/08	DBT CRD 2126 05/07/19 61080081 FARMD, LLC 3423 Piedmont Rd., 17705495122 GA C#9215	31.17-
5/08	DBT CRD 2126 05/07/19 61058040 FARMD, LLC 3423 Piedmont Rd., 17705495122 GA C#9215	83.12-
5/08	DBT CRD 2126 05/07/19 60663581 SEATED APP 60 State St, Suite 19034367738 MA C#9215	110.83-
5/08	DBT CRD 0000 05/08/19 20919434 COZZINI BR 350 Howard Ave 224-220-8331 IL C#9215	164.00-
5/08	DBT CRD 2126 05/07/19 61058637 FARMD, LLC 3423 Piedmont Rd., 17705495122 GA C#9215	166.24-
5/08	DBT CRD 0000 05/07/19 08027579 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#9215	346.70-
5/08	DBT CRD 0000 05/07/19 12895628 GOOGLE *AD 1600 Amphitheatre cc google.com CA C#9165	500.00-
5/08	FINTECHEFT Rive Gauche Wine CCD 47-3390646	185.59-

Date 5/31/19 Page 10
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/08	CORP COLL INLAND FRESH SEA CCD 40187	376.85-
5/08	FintechEFT National Distrib CCD 47-3390646	457.25-
5/08	FintechEFT Empire Distribut CCD 47-3390646	646.02-
5/08	SETTLEMENT Rewards Network CCD 31384-024509613	669.23-
5/08	PaycorFees PAYCOR INC. CCD 204660540996764	856.23-
5/08	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	1,121.33-
5/09	DBT CRD 0000 05/08/19 24182435 DECATUR AT 205 SWANTON WAY ST 404-378-4231 GA C#9629	14.70-
5/09	DBT CRD 0000 05/09/19 46978828 Intuit *Qu 2535 Garcia Ave 800-446-8848 CA C#9215	35.00-
5/09	DBT CRD 2132 05/08/19 69088662 WHENIWORK. 420 N. 5th Street, 6513304482 MN C#9165	99.00-
5/09	DBT CRD 0000 05/08/19 08028762 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#9215	294.00-
5/09	FintechEFT fintech.net CCD 47-3390646	51.50-
5/09	FINTECHEFT ATLANTA BEVERAGE CCD 47-3390646	215.75-
5/09	FintechEFT Georgia Crown Di CCD 47-3390646	296.27-
5/09	FINTECHEFT Chalkboard Distr CCD 47-3390646	530.24-

Date 5/31/19 Page 11
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/09	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	645.40-
5/09	FINTECHEFT UNITED DISTRIBUT CCD 47-3390646	1,042.70-
5/09	FintechEFT Quality Wine & S CCD 47-3390646	1,946.09-
5/09	Telephone transfer debit to Acct No. @XXXXXXXXXX@7696 D	1,076.92-
5/10	DBT CRD 0000 05/09/19 08029972 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#9215	382.12-
5/10	DBT CRD 1711 05/09/19 48645982 VENMO 117 BARROW STREET 8558124430 NY C#9215	412.00-
5/10	FintechEFT Savannah Distrib CCD 47-3390646	692.17-
5/10	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	1,525.30-
5/10	Xtr to B. Cloud per B. Cloud	1,076.92-
5/10	Transf to Deep End LLC Confirmation number 510190006	185.00-
5/10	CHECK 60059 513 CAPITAL	300.00-
5/13	DBT CRD 0000 05/10/19 80598607 SQU*SQ *K 1000 L and P Parkw Monroe GA C#9215	195.00-
5/13	DBT CRD 0000 05/10/19 08030058 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#9215	345.88-
5/13	DBT CRD 1711 05/11/19 65830175 VENMO	1,030.00-

Date 5/31/19 Page 12
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
	117 BARROW STREET 8558124430 NY C#9215	
5/13	BTOT ADJ BANKCARD 1237	10.00-
	CCD 513331030151625	
5/13	FINTECHEFT Quality Wine & S	95.82-
	CCD 47-3390646	
5/13	FintechEFT Avant Partir	151.92-
	CCD 47-3390646	
5/13	CORP COLL INLAND FRESH SEA	445.49-
	CCD 40187	
5/13	VENDOR PAY SYSCO ATLANTA	1,184.90-
	CCD Cust #193425	
5/13	VENDOR PAY SYSCO ATLANTA	1,507.33-
	CCD Cust #193425	
5/13	VENDOR PAY SYSCO ATLANTA	1,859.56-
	CCD Cust #193425	
5/14	TGM Bread GENERAL MUIR	300.54-
	CCD The Mercury	
5/14	ECOLAB 010 Ecolab Inc.	408.38-
	CCD 010532219-1944	
5/14	POC fund PAYCOR INC.	1,739.30-
	CCD 274211319102701	
5/14	AFA AETNA AFA	9,193.02-
	CCD 3955	
5/14	tax fund PAYCOR INC.	9,492.23-
	CCD 246233098312086	
5/14	DD - Fund PAYCOR INC.	26,961.19-
	CCD 844800934656680	
5/15	FintechEFT Avant Partir	40.68-
	CCD 47-3390646	
5/15	PaycorFees PAYCOR INC.	231.90-
	CCD 71249569203174	
5/15	FintechEFT Empire Distribut	486.54-
	CCD 47-3390646	
5/15	SETTLEMENT Rewards Network	588.04-
	CCD 31407-024524029	

Date 5/31/19 Page 13
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/15	FintechEFT National Distrib	602.37-
	CCD 47-3390646	
5/15	VENDOR PAY SYSCO ATLANTA	1,405.46-
	CCD Cust #193425	
5/15	CORP COLL INLAND FRESH SEA	1,649.30-
	CCD 40187	
5/16	Stop Payment Charge	30.00-
5/16	Stop Payment Charge	30.00-
5/16	Stop Payment Charge	30.00-
5/16	Stop Payment Charge	30.00-
5/16	Stop Payment Charge	30.00-
5/16	Stop Payment Charge	30.00-
5/16	DBT CRD 0000 05/15/19 08035815	939.17-
	ROYAL FOOD	
	3720 ZIP INDUSTRIA	
	TEL6786862234 GA C#2144	
5/16	VENDOR PAY SYSCO ATLANTA	136.70-
	CCD Cust #193425	
5/16	FINTECHEFT Chalkboard Distr	289.47-
	CCD 47-3390646	
5/16	FintechEFT Georgia Crown Di	401.46-
	CCD 47-3390646	
5/16	VENDOR PAY SYSCO ATLANTA	857.06-
	CCD Cust #193425	
5/16	FINTECHEFT United Distribut	864.35-
	CCD 47-3390646	
5/16	FINTECHEFT Quality Wine & S	1,407.83-
	CCD 47-3390646	
5/16	GPC EFT GPC	2,124.58-
	PPD 0179680034ATL	
5/16	VENDOR PMT Central Insuranc	3,909.79-
	PPD #61288821	
5/17	DBT CRD 0000 05/16/19 10495804	76.10-
	BAYMONT IN	

Date 5/31/19 Page 14
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
	136 TOWN CENTER BL EUFAULA AL C#2144	
5/17	FintechEFT Savannah Distrib CCD 47-3390646	340.36-
5/17	TGM Bread GENERAL MUIR CCD The Mercury	387.84-
5/17	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	517.79-
5/20	DBT CRD 0000 05/17/19 46237632 SQU*SQ *AL 34 McGee Drive Panama City B FL C#2144	33.12-
5/20	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	1,433.40-
5/21	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	64.20-
5/21	FintechEFT Savannah Distrib CCD 47-3390646	219.00-
5/21	POC fund PAYCOR INC. CCD 168116822520854	1,799.21-
5/21	tax fund PAYCOR INC. CCD 191984790620043	6,526.12-
5/21	DD - Fund PAYCOR INC. CCD 254213990730098	15,663.00-
5/22	DBT CRD 0000 05/21/19 08041491 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#2144	290.42-
5/22	PaycorFees PAYCOR INC. CCD 130357156449814	155.16-
5/22	VENDOR PAY SYSCO ATLANTA CCD Cust #193425	194.41-
5/22	CORP COLL INLAND FRESH SEA CCD 40187	218.27-
5/22	FintechEFT National Distrib CCD 47-3390646	295.69-

Date 5/31/19 Page 15
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/22	FintechEFT Empire Distribut CCD 47-3390646	364.44-
5/22	Telephone transfer debit to Acct No. @XXXXXXXXXX@7696 D	1,653.85-
5/23	DBT CRD 0000 05/22/19 26170696 H &F BREAD 1500 MARIETTA BLVD 404-350-8877 GA C#2144	359.46-
5/23	FintechEFT Georgia Crown Di CCD 47-3390646	218.92-
5/23	FINTECHEFT Savannah Distrib CCD 47-3390646	370.93-
5/23	FintechEFT Quality Wine & S CCD 47-3390646	613.72-
5/23	FintechEFT United Distribut CCD 47-3390646	952.54-
5/24	DBT CRD 0000 05/23/19 08043909 ROYAL FOOD 3720 ZIP INDUSTRIA TEL6786862234 GA C#2144	274.79-
5/24	ECOLAB 010 Ecolab Inc. CCD 010532219-372	128.94-
5/24	ECOLAB 010 Ecolab Inc. CCD 010532219-373	130.63-
5/24	ECOLAB 010 Ecolab Inc. CCD 010532219-374	142.64-
5/28	DBT CRD 2024 05/27/19 77047576 DROPBOX*K8 185 Berry Street DB.TT/CHELP CA C#2144	9.99-
5/28	DBT CRD 0000 05/27/19 23046592 H &F BREAD 1500 MARIETTA BLVD 404-350-8877 GA C#2144	136.37-
5/28	DBT CRD 1029 05/28/19 96421891 PAYPAL *PA	200.00-

Date 5/31/19 Page 16
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals		
Date	Description	Amount
	2211 North First S	
	San Jose CA C#2144	
5/28	DBT CRD 0000 05/24/19 08044910	239.96-
	ROYAL FOOD	
	3720 ZIP INDUSTRIA	
	TEL6786862234 GA C#2144	
5/28	CORP COLL INLAND FRESH SEA	277.96-
	CCD 40187	
5/28	TGM Bread GENERAL MUIR	322.14-
	CCD The Mercury	
5/28	052819CASH UpServe, Inc.	649.00-
	CCD PYMT45677	
5/28	CHECK 60060	300.00-
	513 CAPITAL	
5/28	CHECK 60062	300.00-
	513 CAPITAL	
5/29	DBT CRD 2127 05/28/19 61464775	199.00-
	GETBENTO.C	
	584 Broadway4th Fl	
	12127489156 NY C#2144	
5/29	DBT CRD 0000 05/28/19 78906530	225.00-
	MAILCHIMP	
	675 PONCE DE LEON	
	MAILCHIMP.COM GA C#2144	
5/29	DBT CRD 0000 05/28/19 08048128	294.42-
	ROYAL FOOD	
	3720 ZIP INDUSTRIA	
	TEL6786862234 GA C#2144	
5/29	DBT CRD 2127 05/28/19 60499813	766.25-
	MYPORTR S	
	605 Selig Drive SW	
	8449767837 GA C#2144	
5/29	FintechEFT National Distrib	215.10-
	CCD 47-3390646	
5/29	VENDOR PAY SYSCO ATLANTA	484.10-
	CCD Cust #193425	

Date 5/31/19 Page 17
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals

Date	Description	Amount
5/29	VENDOR PAY SYSCO ATLANTA	606.55-
	CCD Cust #193425	
5/29	POC fund PAYCOR INC.	1,297.49-
	CCD 308730153115620	
5/29	tax fund PAYCOR INC.	4,708.18-
	CCD 443191180892430	
5/29	DD - Fund PAYCOR INC.	14,144.56-
	CCD 139713009633688	
5/30	ATM W/D 0321 05/30/19 00003281	803.00-
	1270 CAROL	
	1270 CAROLINE ST N	
	ATLANTA GA C#2144	
5/30	FintechEFT Quality Wine & S	26.99-
	CCD 47-3390646	
5/30	OPTICARD MERCHANTWHS2	100.08-
	CCD EFT-Inv1026869	
5/30	FINTECHEFT Chalkboard Distr	148.90-
	CCD 47-3390646	
5/30	CORP COLL INLAND FRESH SEA	150.84-
	CCD 40187	
5/30	PaycorFees PAYCOR INC.	171.05-
	CCD 196718722230557	
5/30	VENDOR PAY SYSCO ATLANTA	262.34-
	CCD Cust #193425	
5/30	FintechEFT Empire Distribut	463.58-
	CCD 47-3390646	
5/30	CHECK 60063	300.00-
	513 CAPITAL	
5/31	TGM Bread GENERAL MUIR	55.80-
	CCD The Mercury	
5/31	FintechEFT Quality Wine & S	113.64-
	CCD 47-3390646	
5/31	FintechEFT Savannah Distrib	128.37-
	CCD 47-3390646	
5/31	FINTECHEFT UNITED DISTRIBUT	386.56-
	CCD 47-3390646	

Date 5/31/19 Page 18
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

Checks and Withdrawals		
Date	Description	Amount
5/31	Service Charge	26.75-SC

Statement Code Summary
Code Description
SC Service Charge

--- CHECKS IN NUMBER ORDER ---					
Date	Check No	Amount	Date	Check No	Amount
5/13		11,865.00	5/09	2484	113.65
5/02	2439*	385.48	5/22	2485	128.00
5/02	2442*	30.00	5/29	2486	150.00
5/02	2448*	30.00	5/16	2487	50.00
5/02	2455*	35.90	5/15	2488	54.90
5/07	2459*	45.00	5/20	2489	165.00
5/02	2462*	300.44	5/15	2490	100.19
5/09	2464*	25.00	5/14	2491	294.50
5/03	2465	98.00	5/15	2492	94.74
5/07	2466	332.50	5/22	2493	63.80
5/02	2467	83.78	5/20	2494	54.00
5/06	2468	138.50	5/20	2496*	404.63
5/06	2469	377.93	5/20	2497	102.00
5/08	2470	57.50	5/28	2498	240.00
5/07	2471	796.83	5/20	2499	312.92
5/09	2472	54.00	5/23	2502*	1,990.38
5/06	2473	83.90	5/24	2503	256.18
5/06	2474	201.67	5/23	2504	443.22
5/07	2475	50.00	5/30	2505	295.54
5/08	2476	426.14	5/30	2507*	521.33
5/06	2477	59.20	5/24	2508	488.99
5/13	2478	188.00	5/24	2509	362.72
5/13	2479	425.00	5/30	2511*	341.91
5/09	2480	102.00	5/23	2513*	461.30
5/30	2481	336.60	5/23	2514	459.08
5/09	2482	50.00	5/24	2515	429.36
5/09	2483	98.00	5/23	2516	370.41

* Denotes missing check numbers

Date 5/31/19 Page 19
Primary Account @XXXXXXXXXX@7704

COMMERCIAL FLAT FEE CHECKING @XXXXXXXXXX@7704 (Continued)

--- CHECKS IN NUMBER ORDER ---					
Date	Check No	Amount	Date	Check No	Amount
5/23	2517	397.53	5/28	2531	81.93
5/23	2518	420.21	5/31	2535*	108.40
5/24	2519	467.11	5/31	2536	796.83
5/23	2520	256.27	5/31	2537	287.32
5/28	2521	520.10	5/31	2538	152.75
5/24	2522	405.05	5/31	2540*	244.03
5/23	2523	395.69	5/31	2543*	170.10
5/23	2524	360.19	5/06	60058*	-See above-
5/23	2526*	370.26	5/10	60059	-See above-
5/23	2527	1,234.27	5/28	60060	-See above-
5/24	2528	218.98	5/28	60062*	-See above-
5/28	2529	308.46	5/30	60063	-See above-
5/30	2530	176.31			

* Denotes missing check numbers

Daily Balance Information

Date	Balance	Date	Balance	Date	Balance
5/01	2,891.98	5/13	27,828.85	5/23	3,892.94
5/02	325.00	5/14	234.08	5/24	5,676.39
5/03	2,532.27	5/15	3,753.84	5/28	20,229.86
5/06	29,502.95	5/16	975.06	5/29	2,139.21
5/07	2,293.62	5/17	6,022.23	5/30	207.17
5/08	3,549.14	5/20	25,434.17	5/31	1,653.80
5/09	3,045.87	5/21	5,158.89		
5/10	5,644.90	5/22	8,406.46		

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF GEORGIA
ATLANTA DIVISION

IN RE:) CHAPTER 11
)
SOUTHEASTERN HOSPITALITY, LLC))
) CASE NO: 18-67291-pmb
)
Debtor.)
)
_____)

CERTIFICATE OF SERVICE

I certify that a copy of the foregoing **Monthly Operating Report for the Period from May 1, 2019, through May 31, 2019**, was served via electronic mail to the following interested parties:

Thomas Wayne Dworschak
Office of the United States Trustee
362 Richard Russell Bldg.
75 Ted Turner Drive SW
Atlanta, GA 30303

This 2nd day of July 2019.

/s/ William A. Rountree
William A. Rountree
Georgia Bar No. 616503
Rountree, Leitman & Klein, LLC
Century Plaza I
2987 Clairmont Road, Suite 175
Atlanta, GA 30329
404 584-1244
wrountree@randllaw.com